

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER

2016 APR 22 AM 8:15
Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

DEMOCRATIC ALLIANCE FOR ACTION

ADDRESS (number and street)

Check if different
than previously
reported. (ACC)

24829 SAGECREST CIRCLE

STEVENSON RANCH

CA

91381-2238

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

000407262

3. IS THIS
REPORT

X

NEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT
(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)

July 15
Quarterly Report (Q2)

October 15
Quarterly Report (Q3)

January 31
Year-End Report (YE)

July 31 Mid-Year
Report (Non-election
Year Only) (MY)

Termination Report
(TER)

(b) Monthly
Report
Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of

(d) 30-Day
POST-Election
Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

CA

5. Covering Period

01 / 01 / 2016

through

03 / 31 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

JOHN M ANDERSON

Signature of Treasurer

John M Anderson

Date

04 / 10 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

DEMOCRATIC ALLIANCE FOR ACTION

Report Covering the Period: From: 01 01 2014 To: 03 31 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2016</u>		<u>13,125.83</u>
(b) Cash on Hand at Beginning of Reporting Period.....	<u>13,125.83</u>	
(c) Total Receipts (from Line 19).....	<u>1,382.80</u>	<u>1,382.80</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<u>14,508.63</u>	<u>14,508.63</u>
7. Total Disbursements (from Line 31).....	<u>888.87</u>	<u>888.87</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<u>13,619.76</u>	<u>13,619.76</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<u>0</u>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<u>0</u>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

Page 4

II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share	23887	23887	
(ii) Non-Federal Share	0	0	
(b) Other Federal Operating Expenditures	0	0	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	23887	23887	
22. Transfers to Affiliated/Other Party Committees	0	0	
23. Contributions to Federal Candidates/Committees and Other Political Committees	0	0	
24. Independent Expenditures (use Schedule E)	0	0	
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)	0	0	
26. Loan Repayments Made	0	0	
27. Loans Made	0	0	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	100	100	
(b) Political Party Committees	0	0	
(c) Other Political Committees (such as PACs)	0	0	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	100	100	
29. Other Disbursements	550	550	
30. Federal Election Activity (52 U.S.C. § 30101(20))			
(a) Allocated Federal Election Activity (from Schedule H6)			
(i) Federal Share	0	0	
(ii) "Levin" Share	0	0	
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0	0	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	88887	88887	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	88887	88887	

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1,382.89	1,382.80
34. Total Contribution Refunds (from Line 28(d))	100.	100.
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1,282.80	1,282.80
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	238.87	238.87
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	238.87	238.87

NOT A PART OF THE CAMPAIGN RECORD

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE OF

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DEMOCRATIC ALLIANCE FOR ACTION

Full Name (Last, First, Middle Initial)

A.

CA DEMOCRATIC PARTY

Mailing Address

1830 - 9th STREET

City

State

Zip Code

SACRAMENTO CA 95811-7012

Purpose of Disbursement

INSURANCE

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM/DD/YYYY
03/17/2016

Amount of Each Disbursement this Period

550.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

DEBORAH ANDERSON

Mailing Address

24829 SACRED CIRCLE

City

State

Zip Code

STEVENSON RANCH CA 91381

Purpose of Disbursement

OFFICE SUPPLIES RE-IMP

Candidate Name

N/A

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM/DD/YYYY
03/30/2016

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

UNION BANK OF CALIFORNIA

Mailing Address

P.O. BOX 512380

City

State

Zip Code

LOS ANGELES CA 90051

Purpose of Disbursement

BANKING FEE

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM/DD/YYYY
VARIOUS

Amount of Each Disbursement this Period

9.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

PAGE OF

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DEMOCRATIC ALLIANCE FOR ACTION

Full Name (Last, First, Middle Initial)

A.

JOHN M ANDERSON

Mailing Address

24829 SAGECREST CIRCLE

City

STEVENSON RANCH CA 91381

Purpose of Disbursement

PRINTING SUPPLIES

Candidate Name

N/A

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2016

Amount of Each Disbursement this Period

21.30

Memo Item

Full Name (Last, First, Middle Initial)

B.

LAW OFFICE OF DAVID BARLAVI

Mailing Address

25060 AVENUE STANFORD

City

VALENCIA CA 91355

Purpose of Disbursement

REFUND OF CONTRIBUTION

Candidate Name

N/A

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2016

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

CHAD KAMPELL

Mailing Address

25230 STEINBECK AVE

City

STEVENSON RANCH CA 91381

Purpose of Disbursement

RE-IMB PRINTING

Candidate Name

N/A

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2016

Amount of Each Disbursement this Period

60.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE OF

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DEMOCRATIC ALLIANCE FOR ACTION

Full Name (Last, First, Middle Initial)

A.

CA. SECRETARY OF STATE

Mailing Address

POLITICAL REFORM DIV P.O. Box 1457

City

State

Zip Code

SACRAMENTO

CA

Purpose of Disbursement

REGISTRATION

Candidate Name

D/D

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY
01 / 08 / 2016

Amount of Each Disbursement this Period

50.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

MICHELLE CAMPBELL

Mailing Address

25230 STEWISBECK AVE

City

State

Zip Code

STEVENSON RANCH CA 91381

Purpose of Disbursement

RE-IMP. SUPPLIES OFFICE

Candidate Name

N/A

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY
01 / 12 / 2016

Amount of Each Disbursement this Period

35.57

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

U.S. POST OFFICE

Mailing Address

City

State

Zip Code

SANTA CLARITA CA 913809998

Purpose of Disbursement

P.O. BOX RENTAL

Candidate Name

N/A

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2016

Amount of Each Disbursement this Period

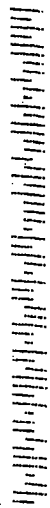
51.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

NOV 04 11 00 AM '00




EVENSON RANCH CA 91381



FEDERAL ELECTION COMMISSION
999 E. STREET NW
WASHINGTON, DC 20463

RECEIVED
FEC MAIL CENTER
2016 APR 22 AM 8:15

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked Date of Receipt 4/22/16
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input checked="" type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
PREPARED 	4/22/16 DATE PREPARED

(3/2015)